

VOLUNTARY FURLOUGH PROGRAM

- PURPOSE:** To establish procedures for authorizing unpaid leaves of absences to assist in the current budget crisis.
- SCOPE:** This policy applies to all merit and non-merit employees subject to the executive authority of the Governor. This policy does not apply to police officers, correctional officers, or “hands-on” health care providers.
- POLICY STATEMENT:** Employees are encouraged to voluntarily take at least 7.5 hours of unpaid leave in each month between July 1, 2002 through June 30, 2003, inclusive. Participation in this program will save money to assist the State in addressing the budget crisis; therefore, employees will not be allowed to preserve their regular salary by making-up time taken as unpaid leave under this program. There will be no impact on accruals or benefits as a result of employees taking unpaid leave under this policy.
- PROCEDURES:**
- A. Commitment for entire year**
Employees who volunteer by June 19, 2002, to take 7.5 hours unpaid leave in each month from July 2002 through June 2003, inclusive, will be able to lock-in the dates of absence and will not be subject to any similar (furlough) cost-saving measures during this time period. If this program fails to achieve required savings or if economic circumstances worsen, this provision does not exempt employees from the statutory/ regulatory/ union settlement procedures should lay-offs become necessary.
- B. Commitment for less than entire year**
Employees who volunteer by June 19, 2002, to take at least 7.5 hours unpaid leave in some, but not all, months from July 2002 through June 2003, inclusive, will be able to lock-in the dates of absence in those months, but may be subject to additional cost-saving measures during this time period.

C. Volunteers after June 19, 2002

Employees may volunteer for unpaid leave from July 1, 2002 through June 30, 2003, with seven (7) calendar days written notice to their supervisor. Such leave taken as a full shift must be for the total number of hours the employee was scheduled to work on the date chosen for this absence.

D. Requests for leave

Employees shall request unpaid leave through their supervisors. Should operational needs indicate that too many employees have requested the same dates or hours off, requests will be granted in order of state seniority. Sample forms are attached.

E. Additional measures

Should this program fail to achieve the required savings or if economic circumstances worsen, then compulsory cost-saving measures may be imposed and flexibility will be lost to agencies and employees.

F. Agencies with Voluntary Unpaid Leave Programs already in effect

Agencies that have a Voluntary Unpaid Leave Program already approved by State Personnel Department will be allowed to maintain those programs and are not subject to the provisions of this policy.

G. Reporting Requirements

Agencies are required to submit status reports simultaneously with payroll information to SPD following the end of each pay period. Such reports shall be sent by electronic mail to the following address: volfurlough@spd.state.in.us and must include the following information: name of employee, classification, number of hours/ days used that pay period, salary rate, total salary saved during that pay period per employee and total for the agency.

REFERENCES:

IC 4-15-1.8-7
31 IAC 1-9-8
31 IAC 2-11-9

EFFECTIVE DATE:

June 12, 2002 through June 30, 2003

APPROVAL:

D. Sue Roberson, State Personnel Director

REQUEST FORM
FY 2002-2003 COMMITMENT
VOLUNTARY FURLOUGH PROGRAM

Agency/ Facility/ Office

Employee Name

Classification

I hereby commit that I will take twelve (12) unpaid leave days between July 1, 2002 and June 30, 2003. Specific dates/ hours of such leave will be arranged with my supervisor and agency chain of command.

Employee's Signature

DATE:_____

Supervisor's Approval

DATE:_____

REQUEST FORM
for OCCASIONAL USE of the
VOLUNTARY FURLOUGH PROGRAM

Agency/ Facility/ Office_____

Employee Name_____

Classification_____

I hereby request the following hours/ day(s) as voluntary unpaid leave under Paragraph C of the Voluntary Furlough Program FY 2002-2003 for the period between July 1, 2002 through June 30, 2003:

Employee's Signature

DATE:_____

Supervisor's Approval

DATE:_____